

FORM I-N		SCHEDULE II		MARCH 1, 20 _____	
Name of person in possession of property (please type or print)			FEIN		County
Address (number and street, city, state, ZIP code)				Taxing district	

Report all locally assessed personal property held, possessed or controlled on March 1 of the current assessment year, in Schedule I or Schedule II.

TO BE ASSESSED AS A CAPITAL LEASE TO PERSON HOLDING, POSSESSING OR CONTROLLING PROPERTY	
Information return of all personal property which was held, possessed or controlled and reported for assessment on Form 1 as of March 1 of the current assessment year by this taxpayer but owned by another person.	

TO BE ASSESSED AS A CAPITAL LEASE TO PERSON IN POSSESSION OF PROPERTY				
NAME AND ADDRESS OF OWNER	LOCATION OF PROPERTY	DATE OF LEASE	MODEL NUMBER AND DESCRIPTION	COST PER 50 IAC 5.1
			TOTAL	

Schedule II includes locally assessed personal property subject to Capital Lease only.